

B1 (Official Form 1)(04/13)

United States Bankruptcy Court Northern District of Illinois		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): Bergman, Michael Scott Jr.		Name of Joint Debtor (Spouse) (Last, First, Middle): Bergman, Abigail
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): AKA Michael S Bergman, Jr.; AKA Michael Bergman; AKA Michael S Bergman, Jr.		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): FKA Abigail Winter-Cruz; FKA Abigail Barcenas Winter; FKA Abigail Winter
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) xxx-xx-8780		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-2306
Street Address of Debtor (No. and Street, City, and State): 703 Ridge Dr. Marengo, IL <div style="text-align: right; font-size: small;">ZIP Code 60152</div>		Street Address of Joint Debtor (No. and Street, City, and State): 703 Ridge Dr. Marengo, IL <div style="text-align: right; font-size: small;">ZIP Code 60152</div>
County of Residence or of the Principal Place of Business: McHenry		County of Residence or of the Principal Place of Business: McHenry
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (<i>amount subject to adjustment on 4/01/16 and every three years thereafter</i>). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input checked="" type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

**Bergman, Michael Scott Jr.
Bergman, Abigail****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet)

Location

Where Filed: **- None -**

Case Number:

Date Filed:

Location

Where Filed:

Case Number:

Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

- None -

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition.**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).

X /s/ Katerina Tsoukalas-Heitkemper December 19, 2014

Signature of Attorney for Debtor(s)

(Date)

Katerina Tsoukalas-Heitkemper**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.☒ No.**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

☒ Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

☒ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.**Information Regarding the Debtor - Venue**

(Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- ☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

- ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)_____
(Address of landlord)

- ☐ Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- ☐ Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Bergman, Michael Scott Jr.
Bergman, Abigail

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Michael Scott Bergman, Jr.
Signature of Debtor **Michael Scott Bergman, Jr.**

X /s/ Abigail Bergman
Signature of Joint Debtor **Abigail Bergman**

Telephone Number (If not represented by attorney)

December 19, 2014
Date

Signature of Attorney*

X /s/ Katerina Tsoukalas-Heitkemper
Signature of Attorney for Debtor(s)

Katerina Tsoukalas-Heitkemper
Printed Name of Attorney for Debtor(s)

Bruning & Associates, P.C.
Firm Name
333 Commerce Drive, Suite 900
Crystal Lake, IL 60014

Address

Email: kbruning@bruninglaw.com
815-455-3000 Fax: 815-455-3049

Telephone Number
December 19, 2014
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X
Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Michael Scott Bergman, Jr.
Abigail Bergman**

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michael Scott Bergman, Jr.

Michael Scott Bergman, Jr.

Date: December 19, 2014

Certificate Number: 03621-ILN-CC-024576411



03621-ILN-CC-024576411

CERTIFICATE OF COUNSELING

I CERTIFY that on November 19, 2014, at 6:10 o'clock PM EST, Michael S Bergman Jr received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 19, 2014 By: /s/Damaris Soto

Name: Damaris Soto

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

B 1D (Official Form 1, Exhibit D) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Michael Scott Bergman, Jr.
Abigail Bergman**

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Abigail Bergman
Abigail Bergman

Date: December 19, 2014

Certificate Number: 03621-ILN-CC-024576412



03621-ILN-CC-024576412

CERTIFICATE OF COUNSELING

I CERTIFY that on November 19, 2014, at 6:10 o'clock PM EST, Abigail Bergman received from Credit Card Management Services, Inc. d/b/a Debthelper.com, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Illinois, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 19, 2014 By: /s/Damaris Soto

Name: Damaris Soto

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Debtors

Case No. _____

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	238,000.00		
B - Personal Property	Yes	4	74,446.02		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	2		645,533.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		1,769.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	19		127,706.89	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			1,853.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			7,037.00
Total Number of Sheets of ALL Schedules		36			
Total Assets			312,446.02		
Total Liabilities				775,008.89	

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Debtors

Case No. _____

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	1,769.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	20,163.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	21,932.00

State the following:

Average Income (from Schedule I, Line 12)	1,853.00
Average Expenses (from Schedule J, Line 22)	7,037.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	1,043.23

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		169,533.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	1,769.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		127,706.89
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		297,239.89

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
703 Ridge Dr. Marengo, IL 60152	Joint Tenancy with 50% Interest	W	107,000.00	298,562.00
524 Prairie Point Drive, Poplar Grove, IL 61065	Joint Tenancy with 50% Interest	W	65,500.00	159,086.00
508 Prairie Point Drive, Poplar Grove, IL 61065	Joint Tenancy with 50% Interest	W	65,500.00	155,337.00

Sub-Total > **238,000.00** (Total of this page)

Total > **238,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account: Chase Checking Account - 6224 Location: JPMorgan Chase Bank, N.A. P O Box 659754 San Antonio, TX 78265 - 9754	J	19.43
		Savings Account: Chase Plus Savings Account 8054 Location: JPMorgan Chase Bank, N.A. P O Box 659754 San Antonio, TX 78265 - 9754	J	5.00
		Checking Account: USAA Secure Checking 0961 Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	J	50.00
		Savings Account: USAA Savings 0953 Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	J	50.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		Furniture: 3 - bedroom sets 2 sofa sets 1 - sectional 2 tables Location: 703 Ridge Dr. Marengo, IL 60152	J	1,000.00
		Appliances: Refrigerator, stove, microwave, dishwasher, freezer Location: 703 Ridge Dr. Marengo, IL 60152	J	400.00
		Household: Plates, glasses, silverware, utensils, pots pans Location: 703 Ridge Dr. Marengo, IL 60152	J	200.00
Sub-Total > (Total of this page)				1,724.43

3 continuation sheets attached to the Schedule of Personal Property

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		Audio-Video: 3 televisions Location: 703 Ridge Dr. Marengo, IL 60152	J	400.00
		Office: All in one computer Location: 703 Ridge Dr. Marengo, IL 60152	J	200.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothes: Clothing for myself and spouse	J	400.00
7. Furs and jewelry.		Jewelry: Wedding bands, bracelet, necklace Location: 703 Ridge Dr. Marengo, IL 60152	J	500.00
8. Firearms and sports, photographic, and other hobby equipment.		Firearms: 1 - 9mm handgun Location: 703 Ridge Dr. Marengo, IL 60152	J	350.00
		Trade Tools: General Mechanics tools and tool box Location: 703 Ridge Dr. Marengo, IL 60152	J	250.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)		Education IRA: 529K for Annabella Bergman Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	H	1,418.59
		Education IRA: 529K for Amber Nicole Winter Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	W	1,210.00
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Retirement: 401K Location: Mercer	W	33,900.00
		Retirement: USAA IRA Location: USAA Federal Savings Bank	H	1,100.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			

Sub-Total > **39,728.59**
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

Sub-Total > **0.00**
(Total of this page)

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Auto: 2014 Buick Enclave 13,800 miles Location: 703 Ridge Dr. Marengo, IL 60152	W	32,993.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **32,993.00**
(Total of this page)
Total > **74,446.02**

(Report also on Summary of Schedules)

Sheet **3** of **3** continuation sheets attached to the Schedule of Personal Property

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, Certificates of Deposit			
Checking Account: Chase Checking Account - 6224 Location: JPMorgan Chase Bank, N.A. P O Box 659754 San Antonio, TX 78265 - 9754	735 ILCS 5/12-1001(b)	19.43	19.43
Savings Account: Chase Plus Savings Account 8054 Location: JPMorgan Chase Bank, N.A. P O Box 659754 San Antonio, TX 78265 - 9754	735 ILCS 5/12-1001(b)	5.00	5.00
Checking Account: USAA Secure Checking 0961 Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	735 ILCS 5/12-1001(b)	50.00	50.00
Savings Account: USAA Savings 0953 Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	735 ILCS 5/12-1001(b)	50.00	50.00
Household Goods and Furnishings			
Furniture: 3 - bedroom sets 2 sofa sets 1 - sectional 2 tables Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	1,000.00	1,000.00
Appliances: Refrigerator, stove, microwave, dishwasher, freezer Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	400.00	400.00
Household: Plates, glasses, silverware, utensils, pots pans Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	200.00	200.00
Audio-Video: 3 televisions Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	400.00	400.00
Office: All in one computer Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	200.00	200.00
Wearing Apparel			
Clothes: Clothing for myself and spouse	735 ILCS 5/12-1001(a)	400.00	400.00
Furs and Jewelry			
Jewelry: Wedding bands, bracelet, necklace Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	500.00	500.00

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<u>Firearms and Sports, Photographic and Other Hobby Equipment</u>			
Firearms: 1 - 9mm handgun Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	350.00	350.00
Trade Tools: General Mechanics tools and tool box Location: 703 Ridge Dr. Marengo, IL 60152	735 ILCS 5/12-1001(b)	250.00	250.00
<u>Interests in an Education IRA or under a Qualified State Tuition Plan</u>			
Education IRA: 529K for Annabella Bergman Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	735 ILCS 5/12-1001(j)	1,418.59	1,418.59
Education IRA: 529K for Amber Nicole Winter Location: USAA Federal Savings Bank 0750 McDermott Freeway San Antonio, TX 78288-0544	735 ILCS 5/12-1001(j)	1,210.00	1,210.00
<u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u>			
Retirement: 401K Location: Mercer	735 ILCS 5/12-1006	33,900.00	33,900.00
Retirement: USAA IRA Location: USAA Federal Savings Bank	735 ILCS 5/12-1006	1,100.00	1,100.00

Total: **41,453.02** **41,453.02**

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxx1524			Opened 4/01/05 Last Active 3/28/13					
Chase Po Box 24696 Columbus, OH 43224		W	Second Mortgage					
			Value \$ 214,000.00				58,892.00	58,892.00
Account No.			Home Mortgage 1st					
Citimortgage PO Box 689196 Des Moines, IA 50368		X W	703 Ridge Dr. Marengo, IL 60152					
			Value \$ 214,000.00				239,670.00	25,670.00
Account No. xxxx0444			Opened 3/01/06 Last Active 7/15/14					
Green Tree Servicing L 332 Minnesota St Ste 610 Saint Paul, MN 55101		X J	508 Prairie Point Drive, Poplar Grove, IL 61065					
			Value \$ 131,000.00				155,337.00	24,337.00
Account No. xxx8473			Opened 2/01/06 Last Active 11/13/13					
Nationwide Advantage Po Box 919000 Des Moines, IA 50391		X J	524 Prairie Point Drive, Poplar Grove, IL 61065					
			Value \$ 131,000.00				159,086.00	28,086.00
Subtotal							612,985.00	136,985.00
(Total of this page)								

1 continuation sheets attached

B6D (Official Form 6D) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No. xxxxxxxx5011							
Wfs Financial/Wachovia Dealer Srvs Po Box 3569 Rancho Cucamonga, CA 91729		W	Opened 12/01/13 Last Active 11/04/14				
			Automobile				
			Value \$ 0.00			32,548.00	32,548.00
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Account No.							
			Value \$				
Subtotal (Total of this page)						32,548.00	32,548.00
Total (Report on Summary of Schedules)						645,533.00	169,533.00

Sheet **1** of **1** continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. xxxx-xx-xx0211 Clay County Clerk of Court 825 North Orange Ave Green Cove Springs, FL 32043		H	01/1/2001 Government Agency Reckless Driving Citation				656.00	0.00 656.00
Account No. Internal Revenue Service STOP 6692 AUSC Austin, TX 73301-0021		J	Income Tax Settlement difference from Credit Card pay-off agreement.				1,113.00	0.00 1,113.00
Account No.								
Account No.								
Account No.								

Sheet **1** of **1** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

Total

(Report on Summary of Schedules)

1,769.00	0.00	1,769.00
1,769.00	0.00	1,769.00

B6F (Official Form 6F) (12/07)

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx7658 ADT Account Services Team 14200 E. Exposition Ave Aurora, CO 80012-2540	W	Utility Bill				498.90
Account No. xxxxxxxx8232 Alexian Brothers BHH 21272 Network Place Chicago, IL 60673	W	Medical				712.00
Account No. xxxxxxxx8604 Alexian Brothers BHH 21272 Network Place CHICAGO, IL 60673	W	Medical				158.00
Account No. xxxxxxxx1137 Alexian Brothers BHH 21272 Network Place Chicago, IL 60673	W	Medical				412.53
Subtotal (Total of this page)						1,781.43

18 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx0726		W	Medical			262.91
Alexian Brothers BHH 21272 Network Place Hoffman Estates, IL 60673						
Account No. xxxxxxxx5881		J	Medical			79.00
Alexian Brothers BHH 21272 Network Place Chicago, IL 60673						
Account No. xxxxxxx9041		W	Medical			437.00
Alexian Brothers BHH 21272 Network Place Chicago, IL 60673						
Account No. xxxx5238		J	Medical			27.50
Alexian Brothers BHH 21272 Network Place Chicago, IL 60673						
Account No. xxxx7005		H	Medical			132.74
Alexian Brothers BHH 21272 Network Place Chicago, IL 60673-1212						
Sheet no. <u>1</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						939.15
Subtotal (Total of this page)						939.15

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxx6159 Alexian Brothers BHH 21272 Network Place Chicago, IL 60673	H	Medical				280.00
Account No. XXXX Alexian Brothers Hosptial 800 Biesterfield Elk Grove Village, IL 60007	H	04/29/2011 Medical This was from a 5 day stay in the hospital after I had a siezure				1,600.00
Account No. xxx6145 Automated Account Management Services 4800 Mills Civic Parkway Suit 202 West Des Moines, IA 50265	W	Other Debt				649.17
Account No. xxx2704 Automated Accounts Management Services 480 Mills Civic Parkway Suit 202 West Des Moines, IA 52065-5265	H	Other Debt Also included is account number 1202705				608.04
Account No. XXXXXXXXXXXXXX Capital One Bank USAA PO Box 85520 Richmond, VA 23285	X J	09/1/2014 Credit Card Incomplete account number				207.00
Sheet no. 2 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 3,344.21

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx4252	W	Opened 4/01/06 Last Active 9/02/09 Credit Card					5,560.00
Capital One, N.a. Capital One Bank (USA) N.A. Po Box 30285 Salt Lake City, UT 84130							
Account No. xxxxxxxxxxxx0508	J	Opened 9/01/14 Last Active 11/25/14 Credit Card					323.00
Capital One, N.a. Capital One Bank (USA) N.A. Po Box 30285 Salt Lake City, UT 84130							
Account No. x7608	W	Medical					144.31
Cary Bortnick, MD 303 E Army Trail Rd Suite 100 Bloomington, IL 60108-2140							
Account No. xxxx7284	W	Opened 8/01/14 Collection Attorney Synchrony Bank					487.00
Cavalry Portfolio Services Attention: Bankruptcy Department 500 Summit Lake Dr. Suite 400 Valhalla, NY 10595							
Account No. xxxxxxxx4186	J	Medical This is the visit ID on the invoice					641.87
Centegra Hospital - Mchenry PO Box 1570 McHenry, IL 60051							
Sheet no. 3 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)			7,156.18

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. x2220 Centegra Physician Car 13707 W Jackson Street Woodstock, IL 60098	H	Medical				15.00
Account No. xxxxxxxxxx5103 Centegra Physician Care LLC PO Box 187 Bedford Park, IL 60499	J	Medical				61.09
Account No. xxxxxxxxxx7220 Centegra Physician Care LLC PO Box 187 Bedford Park, IL 60499-0187	J	Medical				15.00
Account No. xx5103 Centegra Physician Care LLC 13707 W Jackson Street Woodstock, IL 60098-3188	J	Medical				15.00
Account No. xx0214 Century Dental of Huntley 10775 N Rt 47 Huntly, IL 60142	W	Medical				112.80
Sheet no. 4 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 218.89

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx5690 Chase P.o. Box 15298 Wilmington, DE 19850	J	Opened 5/01/05 Last Active 11/29/13 Credit Card				11,703.00
Account No. xxxx8555 Choicerecov 1550 Old Henderson Rd St Columbus, OH 43220	H	Med1 02 Suburban Neurologists				87.00
Account No. xxxxxxxxxxxx4009 Citlbank Visa PO Box 6077 Sioux Falls, SD 57117	W	Credit Card				6,562.36
Account No. xxxxx5183 Collins Asset Group 5725 W Highway 290 Ste 1 Austin, TX 78735	W	Opened 8/01/14 Collection Attorney World Financial Network Bank-V				262.00
Account No. 6538**** Comcast Cable Communications One Comcast Center Philadelphia, PA 19103-2838	H	07/9/2012 Other Debt This is collections account originally opened on earlier date				156.00
Sheet no. 5 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 18,770.36

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx1847 Comenity Bank/bergners Po Box 182789 Columbus, OH 43218	W	Opened 7/01/12 Last Active 11/16/13 Charge Account				1,138.00
Account No. xxxxxxxxxxxx2197 Comenity Bank/Value City Furniture Attn: Bankruptcy Po Box 182686 Columbus, OH 43218	W	Opened 3/29/06 Last Active 8/02/06 Charge Account				Unknown
Account No. xxxxx5183 Comenity Bank/vctrsec Po Box 182789 Columbus, OH 43218	W	Opened 5/08/08 Last Active 8/12/11 Charge Account				262.00
Account No. xxxxxx3948 Convergent Outsourcing 219 Perimeter Center Parkway NE Suite 200 Atlanta, GA 30346	H	05/1/2014 Direct TV				595.00
Account No. xxxxxxxxxxxxxx3164 Creditors Protection S Po Box 4115 Rockford, IL 61101	W	Opened 1/01/14 Collection Attorney Rockford Orthopedic Surgery C				550.00
Sheet no. <u>6</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						2,545.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxxx5129 Creditors Protection S Po Box 4115 Rockford, IL 61101	H	Opened 10/01/11 Collection Attorney Premier Pain Specialists				62.00
Account No. xxxxxxxxxxxx7016 Creditors Protection S Po Box 4115 Rockford, IL 61101	W	Opened 4/01/14 Collection Attorney Rkfd Health Physicians Anesth				51.00
Account No. xxxxx9421 DHL Express 16416 Northchase Dr Houston, TX 77060	J	Other Debt				25.60
Account No. xxxx8818 Directv PO Box 9001069 Louisville, KY 40290-1069	J	Utility Bill				169.72
Account No. xxxxxxxx8920 Dsnb Macys Po Box 8218 Mason, OH 45040	W	Opened 1/01/07 Last Active 8/16/13 Charge Account				1,287.00
Sheet no. <u>7</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 1,595.32

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxx0028 Dte Energy Attention: Bankruptcy Department Po Box 740786 Cincinnati, OH 45274	H	Opened 11/01/05 Last Active 4/08/08 Agriculture				238.00
Account No. xxxx6190 Dupage Law Magistrate 505 County Farm Road P.O. Box 707 Wheaton, IL 60187-0707	H	Government Agency Loan with Extra Credit Union				4,041.00
Account No. xxxxx2999 Dupage Law Magistrate 505 County Farm Road P.O. Box 707 Wheaton, IL 60187-0707	H	Government Agency Circuit City Credit Card				3,246.00
Account No. xxxxxxx0009 Ecmc Po Box 16408 St. Paul, MN 55116	H	Opened 6/01/12 Last Active 11/27/13 Student Loan				11,511.00
Account No. xxxxxx0010 ECMC 1 Imation Place Saint Paul, MN 55128	H	6/2012 Student Loan				8,652.00
Sheet no. <u>8</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 27,688.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. x8993 Elk Grove Medical Associates, LLC PO Box 3169 Carol Stream, IL 60132	W	Medical				195.75
Account No. xxxx9871 Enhanced Recovery Corp Attention: Client Services 8014 Bayberry Rd Jacksonville, FL 32256	H	Opened 7/01/12 Collection Attorney Comcast Cable Communications				191.00
Account No. xxxx3887 ER Solutions/Convergent Outsourcing, INC Po Box 9004 Renton, WA 98057	H	Opened 5/01/14 Collection Attorney Directv				595.00
Account No. xxxxxxxxxxxx1322 Extra Credit Union	H	Opened 4/15/05 Last Active 3/01/08 Credit Card				3,516.00
Account No. xxx0574 First Smiles Dental 278 Memorial Drive Suite 2 Crystal Lake, IL 60014	J	Medical				151.60
Sheet no. <u>9</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 4,649.35

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 2326*** Ford Motor Company 1 American Rd Dearborn, MI 48126	H	11/1/2006 Loan			X	4,504.00
Account No. xxxxxxxxxxx3594 GEGRB/JC Penny Attention: Bankruptcy Po Box 103104 Roswell, GA 30076	W	Opened 7/01/06 Last Active 1/26/12 Charge Account				352.00
Account No. xxxxxxxxxxx3109 GEGRB/Sams Club Gecrb/Sams Club Po Box 103104 Roswell, GA 30076	W	Opened 5/01/10 Last Active 11/18/13 Credit Card				1,786.00
Account No. xxxxxxxxxxx3948 Gemb/walmart Attn: Bankruptcy Po Box 103104 Roswell, GA 30076	W	Opened 11/01/07 Last Active 6/14/12 Charge Account				651.00
Account No. xxxx1112 Harris & Harris Ltd 111 West Jackson BLVD Suite 400 Chicago, IL 60604	J	Medical				51.00
Sheet no. 10 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,344.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxx7683 Healthport - Alexian Borthor HealthPort PO Box 409900 Atlanta, GA 30384	H	Other Debt Copy of Medical Records				45.87
Account No. x4277 Illinois Orthopaedic and Hand 800 Biesterfield 740 Elk Grove Villa, IL 60007	H	Medical				5,962.00
Account No. x7700 Keynote Consulting Po Box 327 Palos Heights, IL 60463	H	Opened 2/01/09 Collection Attorney N.W. Health Institute S.C.				44.00
Account No. xxx-xxxX-399 Kohl's PO Box 3084 Milwaukee, WI 53201-3381	W	Store Card				754.00
Account No. xxxxx7296 Kohn Medical Group 5404 W. Elm Street Suite Q McHenry, IL 60050	H	Medical				120.00
Sheet no. 11 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 6,925.87

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxB000 Lake Anesthesia Associates PO Box 158 Flossmoor, IL 60422-2077	W	Medical				40.00
Account No. xxxxxxxxxxxx3459 Lord and Taylor / GECRB PO Box 960035 Orlando, FL 32896-0035	W	Store Card				422.00
Account No. x3382 Mathers Clinic 5 Virginia Rd Crystal Lake, IL 60014	W	Medical Counseling for daughter				50.00
Account No. xxxx8166 Medical Business Burea 1460 Renaissance Dr Park Ridge, IL 60068	H	Opened 9/01/09 Collection Attorney Park Ridge Anesthesiology				108.00
Account No. xxx5899 Medical Business Burea 1460 Renaissance Dr Park Ridge, IL 60068	H	Opened 4/01/11 Collection Attorney Park Ridge Anesthesiology				69.00
Sheet no. 12 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 689.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx6415 Medical records Online, Inc (MRO) PO Box 61507 King of Prussia, PA 19406	W	Other Debt Medical Records Request				21.00
Account No. Mercer 155 N Upper Wacker Drive, Suite 150 Chicago, IL 60606	W	06/1/2013 Retirement: 401K Location: Mercer				16,883.31
Account No. xxx0728 Merchants & Medical 6324 Taylor Rd Flint, MI 48507	H	Opened 6/01/09 Collection Attorney Extra Credit Union - Loans				4,610.00
Account No. xxx7598 Merchants & Medical 6324 Taylor Rd Flint, MI 48507	H	Opened 3/01/11 Collection Attorney Extra Credit Union				85.00
Account No. xxxx-9287 Mercy Health System 1000 Mineral Point Ave Janesville, WI 52548	J	Medical				25.00
Sheet no. 13 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 21,624.31

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxx-9287		J	Medical				272.73
Mercy Health System 1000 Mineral Point Ave Janesville, WI 53548							
Account No. xxxx-9287		J	Medical				247.73
Mercy Health System 1000 Mineral Point Ave Janesville, WI 53548							
Account No. xxxx0889		J	Medical				10.00
Mercy Health System 1000 Mineral Point Ave Janesville, WI 53548							
Account No. xxxxxxxxxxxxxxxxXXXX		H	04/2/2012 Other Debt Collections				144.00
Mutual Management 401 E State Rockford, IL 61104							
Account No. 1495####		H	03/1/2008 Medical Medical Expense				100.00
Northwest Community Hospital 901 W. Kirchhoff Rd Arlington Heights, IL 60005							
Sheet no. <u>14</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							774.46
Subtotal (Total of this page)							774.46

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx0000 NW Health institute 4641 N. Ashland Ave Chicago, IL 60640	H	02/1/2009 Other Debt				44.00
Account No. xx-xxxxxxx-SEPH Palmer, Reifler & Associates PO Box 607774 Orlando, FL 32860	J	09/26/2014 Other Debt Step daughter was caught shop lifting at Sephora				850.00
Account No. x4858 Park Ridge Anesthesiology 1775 Dempster St Park Ridge, IL 60068	H	04/1/2011 Other Debt Surgery - Medical collections				69.00
Account No. xx8588 Partners In Primary Car 921 N Plum Grove Rd Schaumburg, IL 60173	H	Medical				76.58
Account No. xxx7016 Rockford Health Physicians Anest 2300 North Rockton Ave #304 Rockford, IL 61103	W	Medical				51.70
Sheet no. 15 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						1,091.28

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Rockford Orthopedic Assoc PO Box 5247 Rockford, IL 61125	W	Medical				282.57
Account No. xxxxx-xxxxxx4853 Rockford Orthopedic Associates PO Box 5247 Rockford, IL 61125	H	Medical				356.27
Account No. xxxx3164 Rockford Orthopedic Surgery 308 W State Street Suite 485 Rockford, IL 61110-0615	W	Medical				550.00
Account No. xxxxxxxxxxxx2235 Sams Club / GEMB Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076	W	Opened 11/01/11 Last Active 5/30/13 Charge Account				1,335.00
Account No. xxxxxxxxxxxx3215 Sams Club Discover Card PO Box 960013 Orlando, FL 32896-0013	W	Credit Card				1,786.88
Sheet no. <u>16</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 4,310.72

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxx92A0 Schaumburg Immediate Care 135 E Schaumburg Rd STE 100 Schaumburg, IL 60194	H	04/1/2008 Medical Medical Bill				470.00
Account No. xxxxxxxxxxxx9206 Sears/cbna Po Box 6283 Sioux Falls, SD 57117	W	Opened 3/01/08 Last Active 10/17/13 Credit Card				8,306.00
Account No. 1352*** Suburban Neurologist 800 Biesterfield 740 Elk Grove Village, IL 60007	H	10/1/2011 Medical Medical debt				87.00
Account No. xxx6886 Swedish American Medical Group PO Box 1567 Rockford, IL 61110	W	Medical				25.00
Account No. xx1995 Total Home Health 780 S McLean Blvd Elgin, IL 60123	H	Medical				85.36
Sheet no. <u>17</u> of <u>18</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 8,973.36

B6F (Official Form 6F) (12/07) - Cont.

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 4660**						
TRI 3 Enterprises LLC 1456 W GRACE ST Chicago, IL 60613-2833		H	10/1/2009 Medical			306.00
Account No. 4739						
USAA Federal Savings Bank PO ox 47504 San Antonio, TX 78265		H	10/1/2006 Personal Loan			6,980.00
Account No.						
Account No.						
Account No.						
Sheet no. 18 of 18 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						7,286.00
						Total (Report on Summary of Schedules)
						127,706.89

In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
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In re **Michael Scott Bergman, Jr.,
Abigail Bergman**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Jesus Barcenas	Capital One Bank USAA PO Box 85520 Richmond, VA 23285
William Charles 508 Prairie Point Drive Poplar Grove, IL 61065	Citimortgage PO Box 689196 Des Moines, IA 50368
William Charles 508 Prairie Point Drive Poplar Grove, IL 61065	Green Tree Servicing L 332 Minnesota St Ste 610 Saint Paul, MN 55101
William Charles 508 Prairie Point Drive Poplar Grove, IL 61065	Nationwide Advantage Po Box 919000 Des Moines, IA 50391

Fill in this information to identify your case:

Debtor 1 Michael Scott Bergman, Jr.

Debtor 2 Abigail Bergman
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

☐ Employed

☒ Not employed

Debtor 2 or non-filing spouse

☐ Employed

☒ Not employed

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 0.00	\$ 0.00
3. Estimate and list monthly overtime pay.	+\$ 0.00	+\$ 0.00
4. Calculate gross income. Add line 2 + line 3.	\$ 0.00	\$ 0.00

Debtor 1 **Michael Scott Bergman, Jr.**
Debtor 2 **Abigail Bergman**

Case number (if known) _____

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4.	\$ 0.00	\$ 0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b.	\$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c.	\$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d.	\$ 0.00	\$ 0.00
5e. Insurance	5e.	\$ 0.00	\$ 0.00
5f. Domestic support obligations	5f.	\$ 0.00	\$ 0.00
5g. Union dues	5g.	\$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h.+	\$ 0.00	\$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 0.00	\$ 0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ 0.00	\$ 0.00
8b. Interest and dividends	8b.	\$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 0.00	\$ 0.00
8d. Unemployment compensation	8d.	\$ 0.00	\$ 0.00
8e. Social Security	8e.	\$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <u>Subsidy Assistance</u>	8f.	\$ 600.00	\$ 0.00
8g. Pension or retirement income	8g.	\$ 0.00	\$ 0.00
8h. Other monthly income. Specify: <u>Veterans Association Disability Compensation</u>	8h.+	\$ 1,253.00	\$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$ 1,853.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 1,853.00	\$ 0.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11.	+\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12.	\$ 1,853.00	
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1 Michael Scott Bergman, Jr.

Debtor 2 Abigail Bergman
(Spouse, if filing)

United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

Case number
(If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes. Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Daughter

5

- ☐ No
- ☒ Yes

Step-daughter

17

- ☐ No
- ☒ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,670.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 200.00

4d. Homeowner's association or condominium dues

4d. \$ 10.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Michael Scott Bergman, Jr.**
Debtor 2 **Abigail Bergman**

Case number (if known) _____

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	<u>124.00</u>
6b. Water, sewer, garbage collection	6b. \$	<u>120.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<u>411.00</u>
6d. Other. Specify: _____	6d. \$	<u>0.00</u>
7. Food and housekeeping supplies	7. \$	<u>800.00</u>
8. Childcare and children's education costs	8. \$	<u>825.00</u>
9. Clothing, laundry, and dry cleaning	9. \$	<u>290.00</u>
10. Personal care products and services	10. \$	<u>200.00</u>
11. Medical and dental expenses	11. \$	<u>320.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<u>600.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	<u>100.00</u>
14. Charitable contributions and religious donations	14. \$	<u>0.00</u>
15. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<u>0.00</u>
15b. Health insurance	15b. \$	<u>0.00</u>
15c. Vehicle insurance	15c. \$	<u>320.00</u>
15d. Other insurance. Specify: _____	15d. \$	<u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
	16. \$	<u>0.00</u>
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	<u>597.00</u>
17b. Car payments for Vehicle 2	17b. \$	<u>0.00</u>
17c. Other. Specify: _____	17c. \$	<u>0.00</u>
17d. Other. Specify: _____	17d. \$	<u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).		
18. \$		<u>0.00</u>
19. Other payments you make to support others who do not live with you.		
19. \$		<u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	<u>0.00</u>
20b. Real estate taxes	20b. \$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$	<u>0.00</u>
21. Other: Specify: <u>School Loans</u>	21. +\$	<u>450.00</u>
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$	<u>7,037.00</u>
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	<u>1,853.00</u>
23b. Copy your monthly expenses from line 22 above.	23b. -\$	<u>7,037.00</u>
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	<u>-5,184.00</u>
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.		
Explain: _____		

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.**
Abigail Bergman

Debtor(s)

Case No.

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 38 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 19, 2014

Signature /s/ Michael Scott Bergman, Jr.

Michael Scott Bergman, Jr.

Debtor

Date December 19, 2014

Signature /s/ Abigail Bergman

Abigail Bergman

Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.
Abigail Bergman**

Debtor(s)

Case No.

Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$83,239.00	2013 Debtor
\$40,607.00	2013 Joint Debtor
\$82,169.00	2012 Debtor
\$54,784.00	2012 Joint Debtor

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2. Income other than from employment or operation of business

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

\$3,036.00

\$3,000.00

SOURCE

2013 Husband Veterans Association Disability Compensation

2012 Husband Veterans Association Disability Compensation

3. Payments to creditors

None

☐

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR

**Wells Fargo
Po Box 25341
Santa Ana, CA 92799-5341**

DATES OF
PAYMENTS

3 months of car payments

AMOUNT PAID

\$1,875.00

AMOUNT STILL
OWING

\$32,548.00

None

☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF
PAYMENTS/
TRANSFERS

AMOUNT
PAID OR
VALUE OF
TRANSFERS

AMOUNT STILL
OWING

None

☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND
RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL
OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

☒

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER

NATURE OF
PROCEEDING

COURT OR AGENCY
AND LOCATION

STATUS OR
DISPOSITION

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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- None ☐ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---------------------------------------------------------------------	-----------------	--------------------------------------

5. Repossessions, foreclosures and returns

- None ☐ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
-------------------------------------------	------------------------------------------------------------------	--------------------------------------

6. Assignments and receiverships

- None ☐ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------	-----------------------	-----------------------------------

- None ☐ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	------------------------------------------------------	------------------	--------------------------------------

7. Gifts

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
-----------------------------------------------	-----------------------------------	--------------	----------------------------------

8. Losses

- None ☐ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
--------------------------------------	----------------------------------------------------------------------------------------------------------------	--------------

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9. Payments related to debt counseling or bankruptcy

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Bruning & Associates 333 Commerce Drive Suite 900 Crystal Lake, IL 60014	06/25/2014	1,500.00
Debthelper.com PO Box 220597 West Palm Beach, FL 33422	11/18/2014	24.00

10. Other transfers

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
-----------------------------------------------------------	------	-----------------------------------------------------

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
----------------------------------	---------------------------	---------------------------------------------------------------------------------------------

11. Closed financial accounts

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	----------------------------------------------------------------------------------------	---------------------------------------

12. Safe deposit boxes

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
-------------------------------------------------	---------------------------------------------------------------------	----------------------------	------------------------------------------

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13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
------------------------------	----------------	------------------

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
---------------------------	-----------------------------------	----------------------

15. Prior address of debtor

None ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
306 E Ardmore Ave Roselle IL 60172-0000		01/31/2009,01/15/2012

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

B7 (Official Form 7) (04/13)

6

- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF
GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
------	------------------------------------------------------------------------------------------------------------	---------	--------------------	-------------------------------

- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
------	---------

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
------------------	-------------------------

- None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
------	---------	-------------------------

- None ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
------	---------

- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

B7 (Official Form 7) (04/13)

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NAME AND ADDRESS

DATE ISSUED

20. Inventories

- None ☐ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY
(Specify cost, market or other basis)

- None ☐ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY
RECORDS

21. Current Partners, Officers, Directors and Shareholders

- None ☐ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

- None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

- None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

- None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE
OF WITHDRAWAL

AMOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

- None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None ☐ If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 19, 2014

Signature /s/ Michael Scott Bergman, Jr.
Michael Scott Bergman, Jr.
Debtor

Date December 19, 2014

Signature /s/ Abigail Bergman
Abigail Bergman
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.**
Abigail Bergman

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: Chase	Describe Property Securing Debt: Second Mortgage
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	
Property No. 2	
Creditor's Name: Citimortgage	Describe Property Securing Debt: 703 Ridge Dr. Marengo, IL 60152
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	

B8 (Form 8) (12/08)

Page 2

Property No. 3	
Creditor's Name: Green Tree Servicing L	Describe Property Securing Debt: 508 Prairie Point Drive, Poplar Grove, IL 61065
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	
Property No. 4	
Creditor's Name: Nationwide Advantage	Describe Property Securing Debt: 524 Prairie Point Drive, Poplar Grove, IL 61065
Property will be (check one): <input checked="" type="checkbox"/> Surrendered <input type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input type="checkbox"/> Claimed as Exempt <input checked="" type="checkbox"/> Not claimed as exempt	
Property No. 5	
Creditor's Name: Wfs Financial/Wachovia Dealer Srvs	Describe Property Securing Debt: Automobile
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)).	
Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt	

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1		
Lessor's Name: -NONE-	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date December 19, 2014

Signature /s/ Michael Scott Bergman, Jr.
Michael Scott Bergman, Jr.
Debtor

Date December 19, 2014

Signature /s/ Abigail Bergman
Abigail Bergman
Joint Debtor

United States Bankruptcy Court
Northern District of Illinois

In re **Michael Scott Bergman, Jr.
Abigail Bergman**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	1,500.00
Prior to the filing of this statement I have received	\$	0.00
Balance Due	\$	1,500.00

2. \$ **335.00** of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: **December 19, 2014**

/s/ Katerina Tsoukalas-Heitkemper

Katerina Tsoukalas-Heitkemper

Bruning & Associates, P.C.

333 Commerce Drive, Suite 900

Crystal Lake, IL 60014

815-455-3000 Fax: 815-455-3049

kbruning@bruninglaw.com

**BRUNING & ASSOCIATES, P.C.
BANKRUPTCY ENGAGEMENT AND FEE AGREEMENT**

This Agreement, dated December 3, 2013, is made between Michael and Abigail Bergman, referred to in this agreement as "Client," and Bruning & Associates, P.C. of 333 Commerce Drive, Suite 900, Crystal Lake, Illinois, McHenry County, Illinois, referred to in this Agreement as "B&A"

Client employs B&A to represent Client with respect to the filing of a Chapter 7 Bankruptcy petition and to pursue and/or to defend certain matters related thereto as delineated in the list below.

CHAPTER 7 BANKRUPTCIES Initials: MSB MSB

Client agrees to pay B&A the amount of \$1500.00 in full at the time of signing of this agreement. The flat fee of \$1500.00 for the Chapter 7 includes the \$306 fee to file the Chapter 7 Bankruptcy petition. Full payment is required at the time of signing, because, any fee relating to pre-petition services in a Chapter 7 case which is not paid prior to the filing of Client's case is subject to being discharged in Client's case.

SERVICES INCLUDED:

1. Analysis of client's financial situation, and rendering advice to the client in determining whether to file a Chapter 7 petition in Bankruptcy;
2. Preparation and filing of any Chapter 7 petition, schedules, statement of affairs and plan which may be required;
3. Representation of the client at the meeting of the creditors and any adjourned hearings thereof;
4. Exemption planning;
5. Preparation and filing of reaffirmation agreements and applications as needed;

SERVICES EXCLUDED:

Representation of the client in adversary proceedings and other contested bankruptcy matters. Representation of the debtor(s) in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceedings. Representation of client in any foreclosure, small claims, or other collection actions. Preparation and filing of motions pursuant to USC 522(f)(2)(A) for avoidance of liens on household goods or other property. Representation of the client in Excluded Matters as set forth in paragraphs 1 and 2 above shall be at the hourly rate of \$250.00.

BRUNING & ASSOCIATES, P.C.

By: [Signature] Date: 12/3/13

Client represents that client has carefully read and fully understood every word in this agreement and agrees to its terms and conditions, and agrees to faithfully comply with them.

Client Signature [Signature] Date: 12/3/13

Printed Name: MICHAEL S BERGMAN JR

Client Signature [Signature] Date: 12/3/13

Printed Name: Abigail Bergman

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Michael Scott Bergman, Jr.
Abigail Bergman**

Debtor(s)

Case No.

Chapter

7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

**Michael Scott Bergman, Jr.
Abigail Bergman**

Printed Name(s) of Debtor(s)

X **/s/ Michael Scott Bergman, Jr.**

Signature of Debtor

December 19, 2014

Date

Case No. (if known)

X **/s/ Abigail Bergman**

Signature of Joint Debtor (if any)

December 19, 2014

Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
Northern District of Illinois**

In re Michael Scott Bergman, Jr.
Abigail Bergman Debtor(s) Case No. _____
Chapter 7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: 104

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 19, 2014 /s/ Michael Scott Bergman, Jr.
Michael Scott Bergman, Jr.
Signature of Debtor

Date: December 19, 2014 /s/ Abigail Bergman
Abigail Bergman
Signature of Debtor

ADT
Account Services Team
14200 E. Exposition Ave
Aurora, CO 80012-2540

Alexian Brothers BHH
21272 Network Place
Chicago, IL 60673

Alexian Brothers BHH
21272 Network Place
Hoffman Estates, IL 60673

Alexian Brothers BHH
21272 Network Place
Chicago, IL 60673-1212

Alexian Brothers Hosptial
800 Biesterfield
Elk Grove Village, IL 60007

Atlantic Credit & Finance Inc
PO Box 11887
Roanoke, VA 24022-1887

Automated Account Management Services
4800 Mills Civic Parkway
Suite 202
West Des Moines, IA 50265

Automated Accounts Management Services
480 Mills Civic Parkway
Suite 202
West Des Moines, IA 52065-5265

Automated Accounts Management Services

Automated Accounts Management Services
4800 Mills Civic Parkway
Suite 202
West Des Moines, IA 50265

Capital One Bank USAA
PO Box 85520
Richmond, VA 23285

Capital One, N.a.
Capital One Bank (USA) N.A.
Po Box 30285
Salt Lake City, UT 84130

Cary Bortnick, MD
303 E Army Trail Rd
Suite 100
Bloomington, IL 60108-2140

Cavalry Portfolio Services
Attention: Bankruptcy Department
500 Summit Lake Dr. Suite 400
Valhalla, NY 10595

CBE group
1309 Technology Pkwy
Cedar Falls, IA 50613

Centegra Hospital - McHenry
PO Box 1570
McHenry, IL 60051

Centegra Physician Car
13707 W Jackson Street
Woodstock, IL 60098

Centegra Physician Care LLC
PO Box 187
Bedford Park, IL 60499

Centegra Physician Care LLC
PO Box 187
Bedford Park, IL 60499-0187

Centegra Physician Care LLC
13707 W Jackson Street
Woodstock, IL 60098-3188

Century Dental of Huntley
10775 N Rt 47
Huntly, IL 60142

Chase
Po Box 24696
Columbus, OH 43224

Chase
P.o. Box 15298
Wilmington, DE 19850

Choicerecov
1550 Old Henderson Rd St
Columbus, OH 43220

CitIbank Visa
PO Box 6077
Sioux Falls, SD 57117

Citimortgage
PO Box 689196
Des Moines, IA 50368

Clay County Clerk of Court
825 North Orange Ave
Green Cove Springs, FL 32043

Collins Asset Group
5725 W Highway 290 Ste 1
Austin, TX 78735

Comcast Cable Communications
One Comcast Center
Philadelphia, PA 19103-2838

Comenity Bank/bergners
Po Box 182789
Columbus, OH 43218

Comenity Bank/Value City Furniture
Attn: Bankruptcy
Po Box 182686
Columbus, OH 43218

Comenity Bank/vctrssec
Po Box 182789
Columbus, OH 43218

Convergent Outsourcing
219 Perimeter Center Parkway NE
Suite 200
Atlanta, GA 30346

Credit Protection Service, Inc
30 West State Street #485
Rockford, IL 61110-0615

Creditors Protection Service
308 West State Street #485
PO Box 4115
Rockford, IL 61110-0615

Creditors Protection S
Po Box 4115
Rockford, IL 61101

DHL Express
16416 Northchase Dr
Houston, TX 77060

Directv
PO Box 9001069
Louisville, KY 40290-1069

Dsnb Macys
Po Box 8218
Mason, OH 45040

Dte Energy
Attention: Bankruptcy Department
Po Box 740786
Cincinnati, OH 45274

Dupage Law Magistrate
505 County Farm Road
P.O. Box 707
Wheaton, IL 60187-0707

Ecmc
Po Box 16408
St. Paul, MN 55116

ECMC
1 Imation Place
Saint Paul, MN 55128

Elk Grove Medical Associates, LLC
PO Box 3169
Carol Stream, IL 60132

Enhanced Recovery Corp
Attention: Client Services
8014 Bayberry Rd
Jacksonville, FL 32256

ER Solutions/Convergent Outsourcing, INC
Po Box 9004
Renton, WA 98057

Extra Credit Union

First Smiles Dental
278 Memorial Drive Suite 2
Crystal Lake, IL 60014

FMS Inc
PO Box 707600
Tulsa, OK 74170-7600

Ford Motor Company
1 American Rd
Dearborn, MI 48126

GECRB/JC Penny
Attention: Bankruptcy
Po Box 103104
Roswell, GA 30076

GECRB/Sams Club
Gecrb/Sams Club
Po Box 103104
Roswell, GA 30076

Gemb/walmart
Attn: Bankruptcy
Po Box 103104
Roswell, GA 30076

Green Tree Servicing L
332 Minnesota St Ste 610
Saint Paul, MN 55101

Harris & Harris
111 West Jackson Boulevard Suite 400
Chicago, IL 60604-4134

Harris & Harris Ltd
111 West Jackson BLVD
Suite 400
Chicago, IL 60604

Healthport - Alexian Borthier
HealthPort
PO Box 409900
Atlanta, GA 30384

Illinois Orthopaedic and Hand
800 Biesterfield 740
Elk Grove Villa, IL 60007

Internal Revenue Service
STOP 6692 AUSC
Austin, TX 73301-0021

Jesus Barcenas

Keynote Consulting
Po Box 327
Palos Heights, IL 60463

Kohl's
PO Box 3084
Milwaukee, WI 53201-3381

Kohn Medical Group
5404 W. Elm Street
Suite Q
McHenry, IL 60050

Lake Anesthesia Associates
PO Box 158
Flossmoor, IL 60422-2077

Lord and Taylor / GECRB
PO Box 960035
Orlando, FL 32896-0035

Malcolm S Gerald and Associates

Malcolm S Gerald and Associates
332 South Michigan Ave
Suite 600
Chicago, IL 60604

Malcolm S Gerald and Associates, Inc
332 South Michigan Avenue
suite 600
Chicago, IL 60604-4318

Malcolm S Gerald and Associates, Inc
Chicago

Mathers Clinic
5 Virginia Rd
Crystal Lake, IL 60014

Medical Business Burea
1460 Renaissance Dr
Park Ridge, IL 60068

Medical records Online, Inc (MRO)
PO Box 61507
King of Prussia, PA 19406

Mercer
155 N Upper Wacker Drive, Suite 150
Chicago, IL 60606

Merchants & Medical
6324 Taylor Rd
Flint, MI 48507

Mercy Health System
1000 Mineral Point Ave
Janesville, WI 52548

Mercy Health System
1000 Mineral Point Ave
Janesville, WI 53548

Mutual Management
401 E State
Rockford, IL 61104

Nationwide Advantage
Po Box 919000
Des Moines, IA 50391

NCO Financial Systems, Inc
507 Prudential Road
Horsham, PA 19044

NES Of Ohio
OH

Northwest Community Hospital
901 W. Kirchhoff Rd
Arlington Heights, IL 60005

NW Health institute
4641 N. Ashland Ave
Chicago, IL 60640

Palmer, Reifler & Associates
PO Box 607774
Orlando, FL 32860

Park Ridge Anesthesiology
1775 Dempster St
Park Ridge, IL 60068

Partners In Primary Car
921 N Plum Grove Rd
Schaumburg, IL 60173

Pioneer
197 SW Waterford Court
Lake City, FL 32025

Progressive Financial Services, INC.
1209 4th Ave, South
Dept PRO
Nashville, TN 37210-4107

Rockford Health Physicians Anest
2300 North Rockton Ave #304
Rockford, IL 61103

Rockford Orthopedic Assoc
PO Box 5247
Rockford, IL 61125

Rockford Orthopedic Associates
PO Box 5247
Rockford, IL 61125

Rockford Orthopedic Surgery
308 W State Street Suite 485
Rockford, IL 61110-0615

Sams Club / GEMB
Attention: Bankruptcy Department
Po Box 103104
Roswell, GA 30076

Sams Club Discover Card
PO Box 960013
Orlando, FL 32896-0013

Schaumburg Immediate Care
135 E Schaumburg Rd
STE 100
Schaumburg, IL 60194

Sears/cbna
Po Box 6283
Sioux Falls, SD 57117

Suburban Neurologist
800 Biesterfield 740
Elk Grove Village, IL 60007

Swedish American Medical Group
PO Box 1567
Rockford, IL 61110

Total Home Health
780 S McLean Blvd
Elgin, IL 60123

Transworld Systems In

Transworld Systems Inc
507 Prudential Rd
Horsham, PA 19044

TRI 3 Enterprises LLC
1456 W GRACE ST
Chicago, IL 60613-2833

USAA Federal Savings Bank
PO ox 47504
San Antonio, TX 78265

Wfs Financial/Wachovia Dealer Srvs
Po Box 3569
Rancho Cucamonga, CA 91729

William Charles
508 Prairie Point Drive
Poplar Grove, IL 61065